

**State of California**  
**Department of Health Services**  
**Long Term Care Reimbursement Rates**  
**Rates Effective From**  
**August 1, 2007**

Facility Group	Rate Effective 8/1/2006	Rate Effective 8/1/2007	Percent Change in Rates Without QAF	QAF** Rate Per Diem or %	Rates With QAF Effective 8/1/2007
INTERMEDIATE CARE FACILITIES - (ICF/DD)					
1-59	\$144.73	\$160.28	10.74%	9.23%	\$175.07
60+	\$134.19	\$140.14	4.43%	9.23%	\$153.07
60+ WITH A DP	\$134.19	\$140.14	4.43%	9.23%	\$153.07
WEIGHTED ICF/DD RATE *	\$137.78	\$147.01	6.70%	9.23%	\$160.58
ICF/DD-HABILITATIVE (ICF/DD-H)					
4-6 BEDS	\$159.68	\$159.83	0.09%	9.23%	\$174.58
7-15 BEDS	\$173.64	\$175.36	0.99%	9.23%	\$191.55
WEIGHTED ICF/DD-H RATE *	\$160.75	\$161.03	0.17%	9.23%	\$175.89
ICF/DD-NURSING (ICF/DD-N)					
4-6 BEDS	\$193.99	\$194.10	0.06%	9.23%	\$212.02
7-15 BEDS	\$198.65	\$198.76	0.06%	9.23%	\$217.11
WEIGHTED ICF/DD-N RATE *	\$194.20	\$194.31	0.06%	9.23%	\$212.24
FREESTANDING NURSING FACILITIES, LEVEL A (NF-A)					
ALL OTHERS	\$67.94	\$67.94	0.00%		
LA/BAY	\$99.38	\$99.38	0.00%		
WEIGHTED NF-A RATE *	\$87.31	\$87.31	0.00%		
100+ NF-A Rate (8/1/03) ***	\$89.54	\$89.54	0.00%	Shall continue to receive this rate until All Other Counties rate catches up.	
DISTINCT PART NF-Bs (DP/NF-B) EXCLUDING STATE HOSPITALS					
MAXIMUM DP/NF-B RATE	\$310.68	\$318.19	2.42%		
WEIGHTED DP/NF-B RATE *	\$288.13	\$294.45	2.19%		

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<b>SUBACUTE (MAX RATE)</b>					
HOSPITAL VENT	\$704.88	\$722.79	2.54%		
HOSPITAL NONVENT	\$674.05	\$691.00	2.51%		
WEIGHTED HOSP RATE *	\$687.47	\$704.84	2.53%		
<b>PEDIATRIC SUBACUTE CARE</b>					
HOSPITAL VENT	\$785.01	\$806.07	2.68%		
FREESTANDING VENT	\$733.52	\$753.00	2.66%		
HOSPITAL NON-VENT	\$720.20	\$739.36	2.66%		
FREESTANDING NON-VENT	\$668.71	\$686.29	2.63%		
WEIGHTED PED SUB RATE*	\$714.26	\$733.19	2.65%		
VENTILATOR WEANING	\$44.25	\$45.44	2.69%		
REHAB. THERAPY SUPPL	\$47.46	\$48.74	2.70%		
LEAVE/BEDHOLD REDUCTION	\$5.30	\$5.43	2.45%		
RURAL SWING BED RATE	\$269.26	\$285.35	5.98%		
SPECIAL TREATMENT PROGRAM	\$5.72	\$5.72	0.00%		
ADULT DAY HEALTH CARE	\$76.22	\$76.22	0.00%		

\* All weighted rates are based upon the latest rate study days for both periods.

\*\* QAF is Quality Assurance Fee.

\*\*\* The 100+ Bedsizes rates for 8/1/03 NF-A facilities are given as a result of the hold harmless provision.